



Testimony of Sarah Calder, MaineHealth
In Strong Opposition to LD 1713
“An Act to Prohibit Certain Provisions in Health Care Provider
Contracts with Insurance Carriers”
April 29, 2025

Senator Bailey, Representative Mathieson, and distinguished members of the Health Coverage, Insurance and Financial Services Committee, I am Sarah Calder, Senior Government Affairs Director for MaineHealth, and I am here to testify in strong opposition to LD 1713, “An Act to Prohibit Certain Provisions in Health Care Provider Contracts with Insurance Carriers.”

MaineHealth is an integrated non-profit hospital system that provides a continuum of health care services to communities throughout Maine and New Hampshire. Every day, our over 24,000 care team members support our vision of “Working Together so Our Communities are the Healthiest in America” by providing a range of services from primary and specialty physician services to a continuum of behavioral health care services, community and tertiary hospital care, home health care and a lab.

Very importantly, MaineHealth is an integrated system of care – our ability to provide high-quality care to our patients and meet the evolving needs of our communities relies upon on our ability to operate as a system. The stability of our rural hospitals, our ability to provide community-based behavioral health services, which loses several millions of dollars each year, is dependent on the success of our system as a whole.

The bill before you today would allow carriers to pick and choose what part of that system your constituents can access by legislating what should be left to contract negotiations, in particular all-or-nothing and anti-tiering and steering clauses. Passage of this legislation could jeopardize access to care for our most vulnerable communities by allowing, for example, carriers to not contract with our rural hospitals, further destabilizing an already fragile system. LD 1713 is model legislation being pushed by national groups across the country and does not take into account the state of health care in Maine. Maine’s non-Critical Access Hospitals are the 5th poorest, 2nd most heavily indebted, and 5th oldest nationally.

Additionally, this legislation could cause greater confusion for patients, interrupt their current care plans, and force patients to find new providers, at a time when access to care is already challenged.

This bill also ties the hands of hospitals in contract negotiations and gives the upper hand and leverage to the carriers. Historically, this Committee has been hesitant to insert itself in contract

terms citing that it should be left to negotiations, and we would strongly urge you not to change your position now.

This bill has the potential to cause great harm to our state's health care system, which is already buckling under the pressure of increased labor and supply costs combined with reduced and inadequate reimbursement rates. We strongly urge you to vote against this legislation.

Thank you, and I would be happy to answer questions.